

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1						
2		1					
3		1					
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48							
49							
50							
TOTAL IND.	1						
TOTAL DEP.	1						
TOTAL CLAIMS	1						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS